
From: Hays, Marilyn
Sent: Thursday, September 14, 2017 5:02 PM
To: Houston, Pamela
Cc: Bishop, Debbie; Green, Latoya
Subject: Your OT Cert has been approved
Attachments: 2017_09_14_17_01_17.pdf

Please see the attachment for your signed copy.

If you have any questions, please contact Debbie Bishop at x7529.

Thanks,
Marilyn Hays
Superfund Division
913-551-7862

Overtime & Night Differential Calculator & Certification Form

Employee Name (Last, First):	ston, Pamela	Pay Period Ending Date:	09/16/17
Site/Project Name:	Hurricane Deployment		

DAY	DATE	START	END	LUNCH	DINNER TIME TAKEN WITHIN WORK PERIOD	DINNER PERIOD HOURS	REGULAR HOURS	LEAVE	NIGHT DIFFERENTIAL APPROVED IN ADVANCE OF THE ADMINISTRATIVE WORK WEEK	OVERTIME	NIGHT DIFFERENTIAL
SUN	09/03/17			0.50							
MON	09/04/17			0.50			8.00				
TUE	09/05/17			0.50			8.00				
WED	09/06/17			0.50			8.00				
THU	09/07/17			0.50			8.00				
FRI	09/08/17	6:15 PM	19:15				8.00			1.00	
SAT	09/09/17	7:00 AM	17:45	0.50						10.25	
SUN	09/10/17	8:00 AM	20:15	0.50						11.75	
MON	09/11/17	7:00 AM	18:30	0.50			8.00			3.00	
TUE	09/12/17	7:00 AM	18:30	0.50			8.00			3.00	
WED	09/13/17	7:00 AM	18:30	0.50			8.00			3.00	
THU	09/14/17						8.00				
FRI	09/15/17						8.00				
SAT	09/16/17										
TOTALS:							80.00	-		32.00	-

I certify that the hours posted are accurate for the work performed. I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Employee Signature _____

Date _____

Employee Supervisor Signature  _____

Date 9/14/17

 9-14-17

R7 ROUTING:

- (1) Employee completes/signs
- (2) Timekeeper for PPL review/entry/rev
- (3) Supervisor for signature and PPL approval
- (4) Timekeeper for file retention

D.B.
9/13/17